PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571)-273-2885

			SUE FEE and PUBLICAT orders and notification of (a) specifying a new corre	TION FEE (if requiremaintenance fees verspondence address	ired). Blowill be ma; and/or (b	cks 1 through 5 s iled to the current) indicating a sepa	hould be completed where correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPONI	DENCE ADDRESS (Note: Use	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
26813	7590 12/2	22/2008	hav	e its own certificate	of mailing	g or transmission.	,
P.O. BOX 5813	AASCH & GEBI 36 S, MN 55458-1336	·	and Trader the Patent	signed hereby certifie nark Office electroni and Trademark Offic	s that this pa c filing syste e addressed candria, VA	em in accordance wit to the Commissioner 22313-1450, on this	mission tted via the U.S. Patent h 37 CFR §1.6(a)(4) to r for Patents, Mail Stop s 26 day of March 2009. (Depositors name)
		Sandy Inuchant (Sig				(Signature)	
			march 20 2009				(Date)
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNE	EY DOCKET NO.	CONFIRMATION NO.
09/180,340 08/20/1999			NANCY W.Y. HO		290.00330101		6674
FITLE OF INVENTION	: STABLE RECOMBIT	NANT YEASTS FOR FE	RMENTING XYLOSE TO	ETHANOL	.250.		
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TO	OTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$0	\$0		\$1510	03/23/2009
EXAM	INER	ART UNIT	CLASS-SUBCLASS				
ROBINSON, HOPE A		1652	435-006000	1		•	
. Change of corresponde FR 1.363).	nce address or indicatio	n of "Fee Address" (37	2. For printing on the pa	atent front page, list	:		
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) The names of up to 3 registered patent attorneys or agents OR, alternatively,				
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
ASSIGNEE NAME AN PLEASE NOTE: Unle recordation as set forth (A) NAME OF ASSIG	ess an assignee is identi in 37 CFR 3.11. Comp	A TO BE PRINTED ON T ified below, no assignee eletion of this form is NOT	THE PATENT (print or typodata will appear on the pa I a substitute for filing an a (B) RESIDENCE: (CITY	tent. If an assigned ssignment.	e is identif	ied below, the doc	nument has been filed for
Purdue	Research I	Foundation	West Lafay		•		
ease check the appropria	ate assignee category or	categories (will not be pri				other private group	entity Government
The following fee(s) and Issue Fee Publication Fee (No	small entity discount pe	Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached.					
Advance Order - #	of Copies		The Director is hereby a overpayment, to Deposi	authorized to charge	the requir	ed fee(s), any defic	eiency, or credit any
Change in Entity Statu		above)		- 1 LOGGINE I VAINGOI	3-40	9.5 (chelose all e	extra copy of this form).
a. Applicant claims	SMALL ENTITY status	s. See 37 CFR 1.27.	b. Applicant is no longe	er claiming SMALL	ENTITY:	status. See 37 CFR	1.27(g)(2).
OTE: The Issue Fee and erest as shown by the re-	Publication Fee (if requi cords of the United State	ired) will not be accepted es Patent and Trademark (from anyone other than the Office.	applicant; a registe	ered attorne	ey or agent; or the a	assignee or other party in
Authorized Signature	() () ()	ovence				20,2009	
Typed or printed name <u>David L. Provence</u>				Registration No.			
is collection of informat application. Confidentia mitting the completed a s form and/or suggestion	ion is required by 37 CF lity is governed by 35 U application form to the U is for reducing this burd	R 1.311. The information J.S.C. 122 and 37 CFR 1. USPTO. Time will vary of en, should be sent to the	is required to obtain or ret. 14. This collection is estimelepending upon the individ Chief Information Officer				the USPTO to process) tathering, preparing, and you require to complete

Thi an a sub this Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

5.